

Elizabeth A. White

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

JAN 09 2013

FILED

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

PODER PAC

ADDRESS (number and street)

3520 Maple Court

Check if different
than previously
reported. (ACC)

Falls Church

VA

22041

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00452276

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)

☐ July 15
Quarterly Report (Q2)

☐ October 15
Quarterly Report (Q3)

☐ January 31
Year-End Report (YE)

☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)

☐ Termination Report
(TER)

(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the
State of

5. Covering Period

MM / DD / YYYY
10 / 18 / 2012

through

MM / DD / YYYY
11 / 26 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Catherine Pino

Signature of Treasurer

Catherine Pino

[Electronically Filed]

Date

MM / DD / YYYY
11 / 28 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PODER PAC

Report Covering the Period:


From:

 M M / D D / Y Y Y Y
 10 18 2012

To:

 M M / D D / Y Y Y Y
 11 26 2012

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2012 | | 10688.26 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 11318.48 | |
| (c) Total Receipts (from Line 19) | 1090.00 | 13360.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 12408.48 | 24048.26 |
| 7. Total Disbursements (from Line 31) | 5229.26 | 16869.04 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 7179.22 | 7179.22 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

 This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PODER PAC

Report Covering the Period:

From:

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 18 | | | 2012 | | | |

To:

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 26 | | | 2012 | | | |

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date
11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1090.00

9890.00

(ii) Unitemized

0.00

1470.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

1090.00

11360.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

2000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

1090.00

13360.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0.00

0.00

17. Other Federal Receipts (Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1090.00

13360.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1090.00

13360.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 4729.26 | 12869.04 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 4729.26 | 12869.04 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 2500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements | 500.00 | 1500.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 5229.26 | 16869.04 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5229.26 | 16869.04 |

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 1090.00 | 13360.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1090.00 | 13360.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 4729.26 | 12869.04 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 4729.26 | 12869.04 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 6 OF 10
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

 NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. Mari Carmen Aponte

Mailing Address 4201 Linnean Ave NW

| City | State | Zip Code |
|------------|-------|------------|
| Washington | DC | 20008-3808 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Self employed

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

| MM | DD | YY |
|----|----|------|
| 10 | 21 | 2012 |

Transaction ID : C8947791

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Laura Esquivel

Mailing Address 909 Elm Ave

| City | State | Zip Code |
|-------------|-------|------------|
| Takoma Park | MD | 20912-5841 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Esquivel Strategies

Occupation

consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

| MM | DD | YY |
|----|----|------|
| 10 | 19 | 2012 |

Transaction ID : C8937390

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. Laura Esquivel

Mailing Address 909 Elm Ave

| City | State | Zip Code |
|-------------|-------|------------|
| Takoma Park | MD | 20912-5841 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Esquivel Strategies

Occupation

consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

| MM | DD | YY |
|----|----|------|
| 11 | 19 | 2012 |

Transaction ID : C9004081

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶

1040.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 7 OF 10

| | | | | | | | | |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PODER PAC

Full Name (Last, First, Middle Initial)

A. Maria Mercedes Olivieri

Mailing Address 7027 Veering Ln

| | | |
|-------|-------|------------|
| City | State | Zip Code |
| Burke | VA | 22015-4445 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

| | | | | | | | | | |
|----|----|---|---|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | 07 | | | | | 2012 | | | |

Transaction ID : C8989648

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

TOTAL This Period (last page this line number only)..... ►

1090.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 10

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PODER PAC

Full Name (Last, First, Middle Initial)

A. Avenue Events

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 2012 | | | |

Mailing Address 710-1/2 Mount Vernon Avenue

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Alexandria | VA | 22301 |

Purpose of Disbursement
Meeting expense - food

Transaction ID : D478989

Amount of Each Disbursement this Period

2528.93

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|-------------------------------------------------------------------|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: District:

Full Name (Last, First, Middle Initial)

B. Express EMPS

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 10 | | | 31 | | | 2012 | | | |

Mailing Address P.O. Box 6600

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Hagerstown | MD | 21740 |

Purpose of Disbursement
credit card fee

Transaction ID : D484477

Amount of Each Disbursement this Period

64.33

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|-------------------------------------------------------------------|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: District:

Full Name (Last, First, Middle Initial)

C. NGP Van, Inc.

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 05 | | | 2012 | | | |

Mailing Address 1101 15th Street, NW
Suite 500

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005 |

Purpose of Disbursement
software

Transaction ID : D480112

Amount of Each Disbursement this Period

1245.00

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|-------------------------------------------------------------------|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

3838.26

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 9 OF 10

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

 NAME OF COMMITTEE (In Full)
PODER PAC

Full Name (Last, First, Middle Initial)

A. Utrecht & Phillips, PLLC

Mailing Address 1900 M Street, NW Suite 500

City Washington State DC Zip Code 20036

Purpose of Disbursement
legal fees

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|----|----|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 20 | 12 | | |

Transaction ID : D478991

Amount of Each Disbursement this Period

891.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

891.00

TOTAL This Period (last page this line number only).....▶

4729.26

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|----------------------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PODER PAC

Full Name (Last, First, Middle Initial)

A. Fuentes for Marion County Treasurer

Mailing Address 8320 County Ridge Drive

City
IndianapolisState
INZip Code
46234Purpose of Disbursement
contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 02 | | | 2012 | | | |

Transaction ID : D478997

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. United for Perth Amboy

Mailing Address P.O. Box 56

City
CalifonState
NJZip Code
07830Purpose of Disbursement
contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|----|---|---|----|---|---|------|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 11 | | | 05 | | | 2012 | | | |

Transaction ID : D480110

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| | | | | | | | | | |

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

500.00

TOTAL This Period (last page this line number only).....▶

500.00

PODERPAC

BY LATINAS FOR LATINAS

January 3, 2013

Marion County Clerks Office
200 east Washington Street
Room W122
Indianapolis, IN 46204

Elizabeth A. White

JAN 09 2013

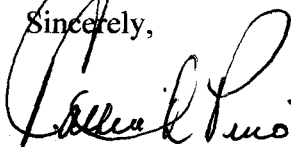
To Whom It May Concern:

FILED

The highlighted contribution in the enclosed FEC report shows the funds used for the single IN contribution, other reports may be viewed through the FEC website, and no funds received for less than \$200 (and thus not itemized on the FEC report) were used for the IN contribution.

If you have any questions, please do not hesitate to contact me at 703-671-7365.

Sincerely,



Catherine Pino
Treasurer, Poder PAC – IN

See attached report

3520 Maple Court
Falls Church, VA 22041
(703) 671-7365
(703) 671-7582
www.poderpac.com